

Centers for Education and Research on Therapeutics
Current Projects

Center	Project	Method	Status – June 2001	Collaborators
Duke	Retrospective evaluation of aspirin use in CAD patients	Determine prevalence of aspirin use, predictors of aspirin use, and consequences of aspirin use from the Duke Databank for Cardiovascular Diseases	Manuscript submitted to JACC Abstract presented at Pharmaceutical Outcomes Research meeting 4/22/01	None
Duke	Evaluation of reasons for aspirin non-use in CAD patients	Determine reasons for aspirin non-use through a patient survey	Abstract presented at DIA Pharmaceutical Outcomes Research meeting on 4/22/01 Manuscript in Process	None
Duke	Retrospective evaluation of beta-blocker use in CHF patients	Determine prevalence of beta-blocker use, predictors of use, and consequences of use from the Duke Databank for Cardiovascular Diseases	Analyses complete Abstract presented at DIA Pharmaceutical Outcomes meeting on 4/22/01 Manuscript in Process	None
Duke	Evaluation of beta-blocker use and non-use in CHF patients	Validate beta-blocker use status and determine reasons for non-use through a patient survey	Abstract presented at DIA Pharmaceutical Outcomes Research meeting on 4/22/01 Manuscript in Process	None
Duke	Prospective demonstration project to improve use of beta-blockers in CHF patients	Developing a multi-faceted intervention to improve beta-blocker use in CHF patients	Intervention near completion Developing patient support	Conceptis Technologies, GlaxoSmithKline, Duke Heart Center, AstraZeneca
Duke	Evaluation of antiarrhythmic drug use patterns including dofetilide in treating atrial fibrillation	Determine national prescribing patterns and trends for antiarrhythmic agents from 1995 through 2001	Data analysis for 1995-2000 underway	FDA
Duke	Evaluation of the Dofetilide Risk Management Program – practitioner perceptions	A practitioner survey is being piloted at Duke to determine perceptions and agreement with the dofetilide risk management program and guidelines	Survey completed Manuscript in process	None
Duke	Evaluation of physicians' understanding of the QT interval and medications that may alter it.	A physician survey has been developed to determine knowledge of the QT interval and medications, diseases, drug combinations that may alter the QT interval	Pilot QT survey complete - Abstract submitted for AHA 2001 meeting - Re-designing survey tool identifying survey sites	None

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Duke	Evaluation of the Dofetilide Risk Management program at Duke – Adherence to guidelines	Comparison of adherence to guidelines for dofetilide and sotalol at Duke Medical Center	Collecting data on dofetilide and sotalol use at Duke	None
Duke	Educational Model on QT-prolonging Medications	Using results from the PBM analysis, the national prescribing pattern analysis, and the QT surveys, develop an educational module for health care providers on QT prolonging medications.	In development	To be determined
Duke	Determine critical Post-Market Surveillance (PMS) questions and explore novel PMS solutions for cardiovascular devices	Post-marketing surveillance workshop and white paper	Background paper drafted Meeting scheduled for June 25-26, 2001	American College of Cardiology, FDA (CDRH), Society of Thoracic Surgeons, Advanced Medical Technology Association (AdvaMed)
Duke	Post-market Surveillance of Transmyocardial Revascularization	Use data collected by the Society of Thoracic Surgeons to evaluate the safety of TMR.	Sites identified; data collection for designed, obtaining IRB approval at all sites, data collection begun at some sites	
Duke	The Effect of Beta-blockers in Heart Failure Patients: a meta-analysis.	Meta-analysis of previously published trials evaluating the use of beta-blockers in CHF patients.	Analysis underway. Abstract submitted to AHA 2001 meeting	None
Duke	Metoclopramide – Tardive Dyskinesia Manuscript	Evaluation of incidence of tardive dyskinesia in patients taking metoclopramide	Manuscript in progress	FDA
Duke	Evaluation of beta-blocker use in VA medical center.	Evaluation of extent of use, factors associated with use, and consequences of use with emphasis on looking at differences between races.	Study development.	Durham, VA Hospital
Duke	Economic Implications of Changes in Treatment Strategies for patients with Cardiovascular Disease.	Decision model and sensitivity analyses.	Model development.	None

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Georgetown	Web-based education about drug interactions, especially in women.	Database evaluations, in vitro and clinical research studies, and educational programs.	General we-based educational content on the established website (www.georgetowncert.org); with approximately 5,100 unique visitors monthly.	None
Georgetown	International registry for drug-induced arrhythmias	Web-based registry and genotyping study to evaluate pharmacogenetic risk factors for drug-induced arrhythmia.	Web-based registry established and cases received; cardiotoxic effects of methadone discovered (www.qtdrugs.org ;)	None
Georgetown	National medication-errors survey of third-year medical students, internal medicine clerkship, and residency programs	Survey of needs, and development of educational programs.	Prototype Educational Module: “Preventable Adverse Drug Reactions: A focus on Drug Interactions” being finalized. Testing phase and evaluation is ongoing.	FDA
Georgetown	Advance PCS data mining for drug interactions	Advance PCS database evaluation, for potentially serious combinations of co-prescribed medications.	Initial evaluation completed; manuscripts in preparation.	Advance PCS
Georgetown	United Mine Workers data mining for drug interactions	Advance PCS database evaluation, for potentially serious combinations of co-prescribed medications.	Specific co-prescribed prescription pairs are currently being proposed and evaluated for development of specific educational programs	Advance PCS /United Mine Workers Funds
Georgetown	Merck-Medco data mining and education about drug interactions, especially in women	Merck-Medco database evaluations and educational programs.	Database evaluations underway. Educational program planning pending results.	Merck-Medco and Society for Women’s Health Research
Georgetown	Curriculum for Therapeutics in Women’s Health	Survey of Literature and development of curricular content	Survey and educational content development underway. Format of educational programming being evaluated.	American Public Health Association, American College of Clinical Pharmacy, American Association of Colleges Pharmacy, University of Illinois at Chicago.

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Georgetown	Educational Programs on Drug-Induced Arrhythmia	Web-based educational format	Web-based tables of drug-induced qt prolongation/torsades de pointes maintained with approximately 4,000 tables downloaded per month (www.torsades.org)	None
Georgetown	Role of Heart Rate Correction in QT Analysis of Drug Action	Clinical Protocol	IRB approval. Screening subjects for GCRC admission.	FDA
Georgetown	Fourth Year Medical School Course on Therapeutics	Didactic, small group, individual teaching and assessment	Course delivered in January and in May 2001. Educational Modules in planning	FDA and other CERTs
Georgetown	Genetic predictors of drug-induced QT interval prolongation	Clinical protocol	Approximately 50 subjects enrolled, another 50 to be studied	NIH Pharmacogenetics Network
HMO Research Network	Antibiotic use in children	Retrospective cohort study using automated record linkage to determine rates of pediatric antimicrobial use from and indications for therapy over time and across 9 geographic regions.	Master drug list and data pooling strategy finalized. Data sets have been collected for 6 of the 9 HMOs to date.	None
HMO Research Network	Asthma drug use	Retrospective cohort study using automated record linkage to assess patterns of use of asthma drug therapy over time and across 9 geographic regions.	Centers are characterizing the asthma cohort and their drug exposures. Datasets have been received by the Data Center for 7 of the 9 HMOs.	Northern California Kaiser, Kaiser Permanente Northwest, Kaiser Permanente Georgia, Kaiser Permanente Colorado, Group Health Cooperative (Puget Sound), Harvard Pilgrim Health Care, HealthPartners, Henry Ford Health System and Fallon Health Care System

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HMO Research Network	Development of Algorithms for Identification of Patients with Churg Strauss Syndrome.	Retrospective cohort study using automated record linkage and record review to determine if it is feasible to develop an algorithm that allows efficient identification of Churg Strauss syndrome in large, unselected populations. If this can be done, then an epidemiologic study of this syndrome will be conducted, focusing on asthma drugs as potential etiologic agents.	Algorithm in development. Medical record abstraction forms have been designated and will be piloted by the end of May.	Northern California Kaiser, Kaiser Permanente Northwest, Kaiser Permanente Georgia, Kaiser Permanente Colorado, Group Health Cooperative (Puget Sound), Harvard Pilgrim Health Care, HealthPartners, Henry Ford Health System and Fallon Health Care System
HMO Research Network	Systematic review of drug interventions in managed care.	Review of published and unpublished reports of drug related interventions conducted in managed care organizations. The assessment focuses especially on interventions that have undergone formal evaluation using either randomized comparison or other quasi-experimental designs.	1500 candidate studies were identified. 100 meet the pre-established criteria for inclusion in the review. An Access database has been created to hold detailed information on the studies of interest and on the results of the assessment.	None
HMO Research Network	Create a Web based resource summarizing effective drug related interventions in managed care.	As above	To follow.	None
HMO Research Network	Appropriateness of use of ACE inhibitors following hospitalization for congestive heart failure.	Retrospective cohort study using automated record linkage to evaluate variation in rates, type, and dosage of ACE-inhibitors dispensed following hospitalization for congestive heart failure. Evaluate the effect of ACE-inhibitor use on rehospitalization	Scheduled to begin in September 2001.	Northern California Kaiser, Kaiser Permanente Northwest, Kaiser Permanente Georgia, Kaiser Permanente Colorado, Group Health Cooperative (Puget Sound), Harvard Pilgrim Health Care, HealthPartners, Henry Ford Health System and Fallon Health Care System

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HMO Research Network	Impact of changing copayment requirements on use of anti-diabetic therapy.	Retrospective cohort study using automated record linkage to assess the impact on different copayment requirements on diabetics' use of antidiabetic therapy.	Scheduled to begin in September 2002.	Northern California Kaiser, Kaiser Permanente Northwest, Kaiser Permanente Georgia, Kaiser Permanente Colorado, Group Health Cooperative (Puget Sound), Harvard Pilgrim Health Care, HealthPartners, Henry Ford Health System and Fallon Health Care System
Penn	Reducing the use of antibiotics for acute bronchitis in outpatients	Observational cohort study	Medical record review in progress.	Pharmacia & Upjohn Univ of Pennsylvania Medical Center
Penn	Effect of formulary changes on the resistance patterns of <i>E. coli</i> and <i>Klebsiella</i>	Observational cohort study Case-control study	Medical records review in progress.	Presbyterian Medical Center NIH
Penn	Use of tetracycline for acne in an outpatient clinic: effects on antibiotic resistance patterns	Primary data collection of a convenience sample of individuals with acne who are receiving tetracycline and a group who is not.	Patient enrollment ongoing.	None
Penn	Measurement of risks of antibiotic use in terms of infection with drug resistant <i>S.pneumoniae</i>	Case-control study using data from the General Practitioners Research Database – an electronic medical record within the UK.	Subject identification initiated. Supplemental data to be requested from UK physicians.	EPIC Dept. Veterans Affairs
Penn	Expanding the use of meta-analysis to study rare side effects of antibiotics	Computer simulations of various data analytic approaches to these analyses.	One manuscript accepted for publication; second manuscript presented at joint statistical meeting; third manuscript in progress.	None

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Penn	Risk Factors for Infection Due to Fluoroquinolone-Resistant <i>Escherichia coli</i> and <i>Klebsiella pneumoniae</i>	Case-control study.	Manuscript submitted for publication	Infectious Diseases Society of America (IDSA) Roche Laboratories Presbyterian Medical Center
Penn	Adherence to Protease Inhibitors in HIV	Observational Cohort Study	Two manuscripts submitted for publication	Agouron pharmaceuticals
Penn	Adherence to NNRTI in HIV	Observational cohort study.	Data collection continuing.	Dupont
Penn	Epidemiologic Investigation of Fluoroquinolone Resistance in Infections Due to Extended-Spectrum β -Lactamase (ESBL) – Producing <i>Escherichia Coli</i> and <i>Klebsiella Pneumoniae</i> (ESBL-EK)	Case-control study	Manuscript accepted for publication in <i>Clinical Infectious Diseases</i>	NIH-NIDDK
Penn	Re-administration of Antibiotic in Patients with a History of Beta-Lactam Allergy	Retrospective cohort study	Proposal submitted to AHRQ	EPIC
Penn	Refill Adherence with Antiretroviral therapy and Outcomes in Human Immunodeficiency Virus (HIV)	Prospective cohort study	Proposal submitted to AHRQ	NIH, VA, Agouron Pharmaceuticals
Penn	Research Sponsorship and the Statistical Power to Detect Adverse Effects of Newly Approved Drugs	Cross-Sectional analysis of published post-marketing epidemiologic studies of ADEs attributable to new drugs receiving FDA approval during an 8-year period.	Literature search underway	None
Penn	Risk Factors for Drug Resistant Urinary Tract Infections	Case control study	Manuscript submitted	Veterans Administration
Penn	Tensions between patient and public health values in generalists use of antibiotics	Cross-sectional survey	One manuscript submitted. Additional data analysis ongoing.	Robert Wood Johnson Foundation
Penn	Risk factors for drug resistant pneumococcal pneumonia	Case-control study	Patient enrollment initiated	NIH/NIAID

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Penn	Expansion of curriculum on therapeutics in medical school.	Curriculum development, implementation, evaluation.	New programs extending preclinical courses into the clinical years under development.	None
UAB	Preferences for fractures and other glucocorticoid associated adverse effects among rheumatoid arthritis patients	Determine rheumatoid arthritis patients' preferences, elicited by rating scale and time tradeoff methods, for validated health-state scenarios depicting glucocorticoid adverse events.	Manuscript published (<i>Medical Decision Making</i> 2001;21:122-132)	None
UAB	Practice pattern variation in glucocorticoid-induced osteoporosis (GIOP)	Characterize glucocorticoid usage and patterns of osteoporosis preventive therapies among a large national cohort.	Manuscript in press (<i>Journal of Rheumatology</i> 2001;28: 1298-1305)	Aetna US Healthcare, US Quality Algorithms (USQA) Merck & Co.
UAB	Racial variations in osteoporosis management	Determine the self-reported prevalence of osteoporosis risk factors and receipt of treatment in a large managed care population and determine racial variation in osteoporosis management knowledge, and attitudes.	Completed - Manuscript in preparation	United Healthcare of Alabama; Merck & Co.
UAB	Long-term safety and toxicity monitoring of non-steroidal anti-inflammatory drugs	Identify potential drug-associated toxicities and monitoring practices of traditional and COX-2 specific NSAIDs in a large managed care population. Assess the influence of a multi-modal provider change technique on process of care.	In progress	United Healthcare of Alabama NIH funded
UAB	Outcomes of elderly onset rheumatoid arthritis	Outcomes study to determine predictors of mortality and morbidity among an established cohort of patients with elderly-onset rheumatoid arthritis.	In progress	Iowa Women's Health Study Arthritis Foundation funded
UAB	Interactive CD-ROM for arthritis patient education	Develop and evaluate the feasibility and efficacy of an interactive, multimedia counseling intervention targeting arthritis-related behaviors.	In progress	Merck & Co.

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UAB	Improving adherence to drugs to prevent osteoporosis	Develop and evaluate a community-based healthcare provider education intervention to improve patient adherence to anti-osteoporotic therapies.	Planned – submitted to NIH	University of New Mexico
UAB	A group randomized trial to improve prevention and treatment of glucocorticoid-induced osteoporosis	Examine the impact of a multi-modal physician intervention on prevention and treatment of glucocorticoid-induced osteoporosis among participants in a large national cohort.	Planned – submitted as part of P60 clinical research center application Begins January 2002	Aetna US Healthcare US Quality Algorithms (USQA) NIH funded
UAB	Pharmacogenomics of methotrexate in rheumatoid arthritis	Examine genetic polymorphisms that are hypothesized to predict susceptibility to RA, clinical response of early RA to methotrexate, and RA toxicity.	Begins January 2002	Immunex NIH funded
UAB	Cost-effective treatments for osteoporosis	Perform an economic evaluation comparing treatments for osteoporosis.	Under consideration	Pacific Care Proctor & Gamble
UAB	Comparative effectiveness of surgical versus medical management for spinal stenosis		Under consideration	None
UNC	NC Asthma improvement project	A statewide educational effort to share knowledge about strategies for improving care of children with asthma — a 3-hour interactive Continuing Medical Education (CME) session and a learning collaborative within a NC AHEC region	Pilot educational program now adopted as a statewide Medicaid Demonstration project.	GlaxoSmithKline

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UNC	Drug metabolism in children with and without cystic fibrosis	Urine assays for caffeine and dextromethorphan and their respective metabolites to assess potential differences in cystic fibrosis patients' drug clearance.	Analysis of data completed June 1, 2000, Abstract accepted for the 15 th Annual North American Cystic Fibrosis Conference and the American Society of Clinical Pharmacology annual meeting.	None
UNC	Tailored implementation strategy for pediatric therapeutic guidelines	Cross-sectional, multi-level assessment of CPG typology and tools for tailoring and adapting CPGs to different settings.	Concluding Consensus Conference held on 12-12-00.	None
UNC	Evidenced-based tools to assess pediatric population	Literature review and grading of evidence on instruments	Critical review of instruments in progress.	Research Triangle Institute
UNC	Efficacy, safety, and pharmacokinetics of drugs in pediatric HIV	High pressure liquid chromatographic method to develop sensitive, specific, practical assay that could detect any of the four protease inhibitors most commonly used clinically (indinavir, ritonavir, saquinovir and nelfinavir) in human plasma samples.	Methods and preliminary results presented at the International Association of Therapeutic Drug Monitoring and Clinical Toxicology Congress in Cairns, Australia in September, 1999. A publication is in preparation.	Columbus Children's Hospital; Cincinnati Children's Hospital
UNC	Prevalence of Type 2 diabetes in childhood	Measuring fasting blood glucose in frozen serum samples obtained in 1997 from 638 9 th and 10 th grade students to determine undiagnosed glucose intolerance.	Year 2 project begun in late Autumn 2000. 98 adolescents enrolled in study so far for whom evaluations are in progress.	None
UNC	Prescribing patterns of psychotropic drugs for adolescents	Retrospective analysis administrative database to address use of psychotropic drugs to treat depression and ADHD	Preliminary results being analyzed; in-depth analysis under way. Results presented at ISPE 2000 and PAS 2001 meetings; manuscript in preparation.	Center for Health Care Policy and Evaluation at United Health Group
UNC	Fellowships and Education Programs: Pediatric pharmacology, pediatric clinical trials, and public outreach	Educational activity	Quintiles Pediatric Pharmacology Fellowships at Kansas City Mercy Children's Hospital and Cincinnati Children's Hospital; 15-practice education network for practitioner training in pediatric clinical trials.	Quintiles

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UNC	CERTs Summer Institute: Using the Evidence on Therapeutics to enhance Quality of Care	Educational activity.	First session held August 5 and 6, 2000. Second session scheduled for September 6-8, 2001. The National Institute for Children's Health Quality (NICHQ) will be a co-sponsor.	None
UNC	MedMARx monitoring and surveillance project	Evaluation of in-patient error reporting system	Initial analysis complete. 2000 pediatric records so far. Recommendations for peds error reduction are being published by USP; presentation at NICHQ/FDA/AHRQ/USP is being published in suppl of Curr Ther Res.	United States Pharmacopeia, Inc.
UNC	Attention deficit-hyperactivity disorder (ADHD) project	Design and test toolkits and process improvement strategies for practitioners to use in the diagnosis and management of Attention Deficit Hyperactivity Disorder (ADHD).	Year 2 project, started October 2000	None
UNC	Pediatric adverse drug event and reaction reporting program	Create a reporting process to improve the process of event reporting and patient care while maintaining confidentiality and the protection of information.	Started February 21, 2000 with redesigned reporting tool , reporting database and evaluation committee. Reports collected every 24 hours. Ms. in preparation.	None
UNC	Skeletal effects of oral replacement of vitamin D and calcium in adolescents with cystic fibrosis	Assess the role of vitamin D and calcium in preventing osteopenia and osteoporosis using a controlled trial with one treatment arm and one control group; each with 30 adolescents who will receive a calcium supplement of 500 mg per day	Year 2 project begun in October 2000; 2-year RCT to determine effects of ergocalciferol and calcitriol; 24 children enrolled at present. One book chapter, one journal article published so far (AM J Clin Nutr); an additional article submitted.	None
UNC	Prevalence of vitamin D-deficient rickets in minority infants	Preliminary survey of North Carolina pediatric primary care providers on attitudes toward vitamin D supplementation during breast-feeding; case evaluation of ethnicity of all rickets patients at two NC tertiary medical centers; proposal for state public health policy change.	In response to study findings, the state of NC begun making free Vitamin D available to ALL breast fed children in the state, distributed through the WIC program, and to date 744 children have already received their vitamins.	Bowman Gray School of Medicine and Wake Forest-Baptist Medical Center

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UNC	Optimizing prescribing and treatment for otitis media		Year 2 project begun in October of 2000; patient selection criteria, problem identification processes all complete. Intervention to begin in Summer 2001.	None
UNC	NC Immunization Registry	Determine the provider factors that lead to early adoption and successful implementation of the NCIR in private practices.	Year 3 project began in Oct. 2001. Initial analysis of registry data in progress; one abstract submitted.	Immunization Branch, Division of Public Health, NC Department of Health and Human Services
Vanderbilt	Medications and Sudden Death	Retrospective Cohort	Arch Gen Psychiat (in press)	Janssen Pharmaceuticals
Vanderbilt	Improving Medication Use in Home Health Care Patients	Randomized Controlled Trial	NSAID manuscript, outpatient, <i>in press</i> , <i>Med Care</i> NSAID manuscript, <i>in press</i> , <i>Med Care</i> Errors in home health, manuscript <i>in press</i> , <i>JAGS</i> Home health manuscript, submitted	John A. Hartford Foundation
Vanderbilt	Evaluating Regulatory Policy Changes	Retrospective Cohort	Cisapride manuscript: <i>JAMA</i> 2000; 284:3036-3039	FDA, HMO Research Network, United Health Care
Vanderbilt	NSAID Clinical Outcomes	Retrospective Inception Cohort	Non-Selective NSAIDs and CHD manuscript, submitted COX2 NSAIDs and PUD-analysis COX2 NSAIDs and CHD Protocol	FDA
Vanderbilt	Other Pharmacoepidemiology	Observational Studies	Statins and Hip Fracture manuscript submitted Inception cohorts manuscript, submitted	None
Vanderbilt	Health Services Research, policy changes	Observational Studies	Effect of mental health carve-out, analysis Effect of enrollment loss on asthma, analysis	NIMH

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Vanderbilt	Educational program to reduce NSAIDs: nursing home	Randomized Control Trial	<i>Med Care</i> 2001; 39:436-445	AHRQ
Vanderbilt	Educational program to reduce NSAIDs: community	Randomized Control Trial	<i>Med Care</i> 2001; 39:425-435	AHRQ
Vanderbilt	Possible medication errors in home health care patients.	Prevalence Cohort	<i>J Am Geriatr Soc</i> (in press)	John A. Hartford Foundation
Vanderbilt	Evaluating treatment effects outside of randomized control trials.	Methods study	Manuscript submitted	None
Vanderbilt	Exposure to systemic corticosteroids in childhood	Prevalence Cohort	Manuscript submitted	FDA
Vanderbilt	Early exposure to erythromycin and infantile hypertrophic pyloric stenosis	Nested case-control	Manuscript submitted	FDA
Vanderbilt	Fetal exposure to erythromycin and infantile hypertrophic pyloric stenosis	Retrospective Cohort	Manuscript in progress	FDA
Vanderbilt	Effect misclassification time-dependent drug exposure on risk estimates	Methods study	Manuscript in progress	None

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Vanderbilt	Cyclic antidepressants and the risk of sudden cardiac death	Retrospective Cohort	Manuscript in progress	Janssen Pharmaceuticals
Vanderbilt	Non-selective NSAIDs and concurrent cytoprotective therapy	Prevalence Cohort	Manuscript in progress	None
Vanderbilt	Loss of Medicaid enrollment and asthma medication compliance	Retrospective Cohort	Protocol under development	AHRQ
Vanderbilt	Use of beta-blocker, aspirin, and lipid-lowering therapy after heart attack	Observational Study	Negotiations with PRO	None
UAB/Penn	Medical errors in the management of gout	Define gout medication errors via a comprehensive review of treatment guidelines and an expert panel. Identify practice pattern variation and predictors of medication errors in gout treatment.	Planned – submitted to AHRQ	United HealthCare of Alabama
Duke/ Georgetown	Evaluation of the prescribing of concomitant QT prolonging medications	Evaluation of the following in a PBM database: 1) combinations of QT prolonging antiarrhythmic agents with other QT prolonging medications, 2) concomitant use of two or more QT prolonging medications (non-antiarrhythmic agents), 3) concomitant use of a QT prolonging medication with a medication that impairs its clearance	Analysis underway	None

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Duke/UAB	Secondary prevention of fractures due to osteoporosis	Design and evaluate a multi-modal provider change technique to improve management of patients who have already sustained a fracture due to osteoporosis	Planned – under development	AQAF; NC PRO